



CITY OF LINCOLN
NEBRASKA

Lincoln Police Department
Thomas K. Casady, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492

LINCOLN
The Community of Opportunity

MAYOR COLEEN J. SENG

lincoln.ne.gov

December 14, 2004

Mayor Seng and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Chipotle Mexican Grill, 2801 Pine Lake Road requesting a class I liquor license.

Chipotle Mexican Grill has requested that Aaron (Mike) Dansky be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Aaron Dansky was born in Hayward, California. He attended Summerville High School graduating in 1986.

Aaron Dansky employment history is as follows:

Present	Manager, Chipotle Mexican Grill	Lincoln, NE.
2002 – 2004	Manager, Chili's	Lincoln, NE.
2000 - 2002	Manager, Cracker Barrel	Lincoln, NE.
1999 – 2000	Manager, Koo Koo Roo	Del Mar, CA.

Stockholder information has been included for your review.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



A nationally accredited law enforcement agency



Liquor License Investigation

Business (DBA) Chipotle Mexican Grill

☒ Manager ☐ Owner ☐ Other _____

Name: AARON (MIKE) DANSKY

US Citizen? ☒ Yes ☐ No

Has applicant ever been cited for liquor law violations? ☒ No ☐ Yes
Explain _____

Does applicant have an interest in another liquor license? ☒ No ☐ Yes
Explain _____

Is spouse qualified to hold a license? Yes ☐ No ☒ N/A

How is applicant if not an owner to be paid? ☒ Salary ☐ Hourly

How many hours will applicant be at the establishment? 45+

Any other employment? ☒ No ☐ Yes, explain _____

Any previous experience with a liquor license? ☒ Yes ☐ No

Any criminal convictions? ☒ No ☐ Yes
Comments _____

Is applicant a property owner in Lincoln? Yes ☐ No ☒

Is applicant involved in any civil litigation? ☒ No ☐ Yes
Comments _____

☒ Photo ☒ Records Check ☒ References

Comments _____

Interview Date 12 / 14 / 04

STATE OF NEBRASKA



Mike Johanns
Governor

NEBRASKA LIQUOR CONTROL COMMISSION

Robert B. Rupe
Executive Director

301 Centennial Mall South, 5th Floor

P.O. Box 95046

Lincoln, Nebraska 68509-5046

Phone (402) 471-2571

Fax (402) 471-2814

TRS USER 800 833-7352 (TTY)

web address: <http://www.nol.org/home/NLCC/>

December 3, 2004

Lincoln City Clerk
555 S. 10th Street
Lincoln, NE 68508

Re: Liquor application for Chipotle Mexican Grill

Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

- 1) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:


- 1) There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION


Tami Freeman
Licensing Division

Enclosures

Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

An Equal Opportunity/Affirmative Action Employer

FORM 35-4001
REV. 12/99

FILED
CITY CLERKS OFFICE
2004 DEC -7 A 9:29
CITY OF LINCOLN
NEBRASKA

APPLICATION FOR LICENSE

Nebraska Liquor Control Commission
PO Box 95046,
301 Centennial Mall South
Lincoln, NE 68509-5046

<http://www.nol.org/home/NLCC/>

Phone: (402) 471-2571

Fax: (402) 471-2814

RECEIVED

NOV -

**NEBRASKA LIQUOR
CONTROL COMMISSION**

LIC # 66350

INSTRUCTIONS: Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders holding over 25% stock 6. All applications must be typewritten or printed clearly 7. Submit in Triplicate 8. Required areas marked by a red asterisk (*)

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH

Class of License (Check applicable class) *	Registration Fee	License Fees	Corporate Surety Bond *send copy
<input type="checkbox"/> A Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> F Beer, On Sale Only - Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> B Beer, Off Sale Only - Inside/Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> J Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input checked="" type="checkbox"/> I Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits	\$45.00	\$150.00	exempt
<input type="checkbox"/> D1 Spirits, Wine, Beer, Off Sale Only - within extraterritorial zoning jurisdiction	\$45.00	\$150.00	exempt
<input type="checkbox"/> C Spirits, Wine, Beer On & Off Sale - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> M Bottle Club (Spirits, Wine, Beer, On Sale)	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> H Nonprofit Corporation	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> K Wine Only, Off Sale	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> O Boat	\$45.00	\$50.00	exempt
<input type="checkbox"/> V Manufacturer of Beer, Wine & Distilled Spirits	\$45.00	Varies \$100 to \$1,000	*\$10,000 min.
<input type="checkbox"/> X Wholesale Liquor	\$45.00	\$500.00	*\$ 5,000 min.
<input type="checkbox"/> W Wholesale Beer	\$45.00	\$250.00	*\$ 5,000 min.
<input type="checkbox"/> Y Farm Winery	\$45.00	\$250.00	*\$ 1,000 min.
<input type="checkbox"/> L Craft Brewery (Brew Pub)	\$45.00	\$250.00	*\$ 1,000 min.

RECEIVED

NOV - 9 2004

**NEBRASKA LIQUOR
CONTROL COMMISSION**

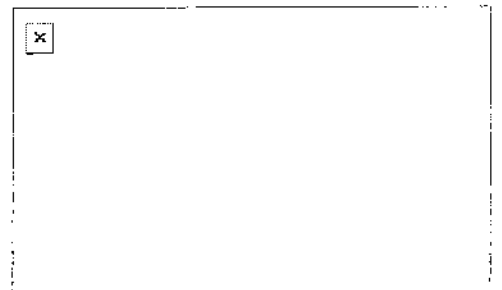
TYPE OF APPLICATION *	NAME OF PERSON ASSISTING WITH APPLICATION	
Type of application being applied for (check appropriate box)		
1. <input type="radio"/> Individual License requires Form 1 to be attached.	Name John M. Boehm	
2. <input type="radio"/> Partnership License requires Form 2 to be attached.	Firm Name	Address
3. <input checked="" type="radio"/> Corporate License requires Forms 3 and Manager Application to be attached	Butler, Galter & Boehm	811 S 13 St., Lincoln, NE 68508

SECTION A – LOCATION INFORMATION – Must be completed by all applicants

Trade Name (name of business) Chipotle Mexican Grill		Telephone Number at premise to be licensed 	
1) Street Address of Proposed licensed premise 2801 Pine Lake Road		2) Mailing Address for receipt of Liquor Control Commission mailings 1543 Wazee Street, Suite 200	
City Lincoln	County Lancaster #2	City Denver	County Denver
Zip Code 68516	Is this located inside the city limits? <input checked="" type="radio"/> Yes <input type="radio"/> No	Zip Code 80202	

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg. is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.

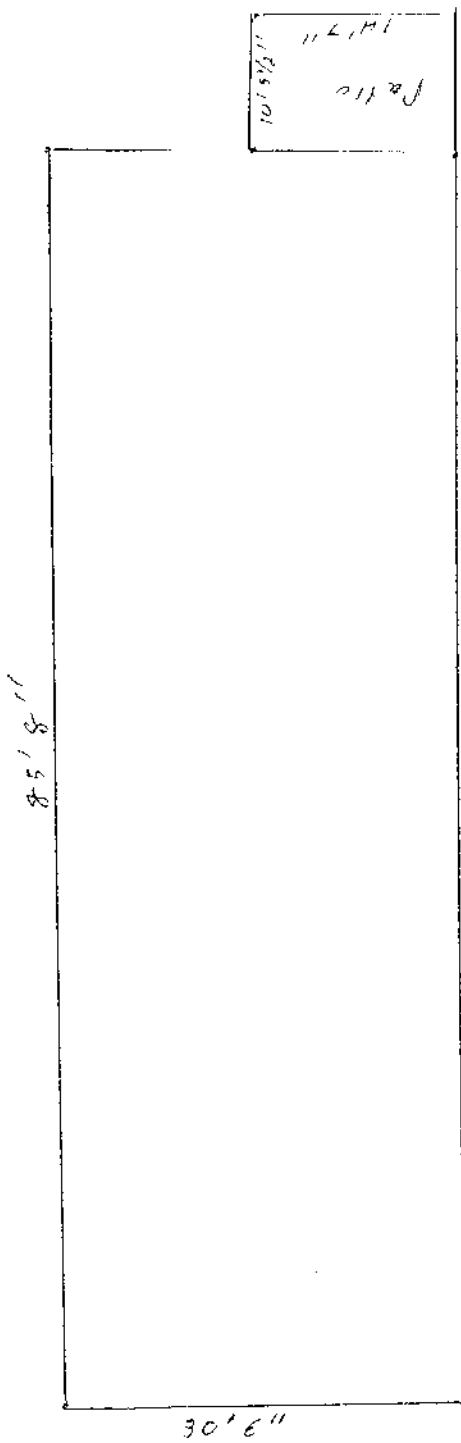


Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement. Approximately 30' x 50' at the East end.

one story area known
as suite V approx
86' x 31' plus patio
area 11' x 15' to the
North

see next page for sketch

N



SECTION B		OTHER INFORMATION REQUIRED *		Explanation/Comments Note: Only what is visible on screen will be printed
	Yes	No		
<p>* 1. READ CAREFULLY. Answer completely and accurately.</p> <p>Has anyone who is a party to this application, or their spouse, <u>ever</u> been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. Include any DWIs or DUIs. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.</p>	Yes <input checked="" type="radio"/>	No <input type="radio"/>	See attached	next page.
<p>* 2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>		
<p>* 3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>		
<p>* 4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>		
<p>* 5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>		

<p>* 6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.</p>	<p>Wells Fargo M. Steven Ellis Kevin M. Reddy</p>		
<p>11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.</p>	<p>See attached</p>		
<p>12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.</p>	<p>Michael Dansky 45-50 hours a week</p>		

<p>13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.</p>	<p>Chili's Corporate Training Pizzeria Uno Corporate Training 2 years as manager with Chili's</p>																												
<p>14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed)</p>	<p>See attached lease and assignment</p> <p style="font-size: 1.2em; font-family: cursive;">10 years from issuance</p>																												
<p>15. When do you intend to open for business?</p>	<p>12/21/04</p>																												
<p>16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">NAME</th> <th style="width: 15%;">FROM (YEAR)</th> <th style="width: 15%;">TO (YEAR)</th> <th style="width: 35%;">RESIDENCE (CITY, STATE)</th> </tr> </thead> <tbody> <tr> <td>M. Steven Ells</td> <td>1993</td> <td>2004</td> <td>Denver, Colorado</td> </tr> <tr> <td>M. Steven Ells</td> <td>1992</td> <td>1993</td> <td>Boulder, Colorado</td> </tr> <tr> <td>Kevin M. Reddy</td> <td>1998</td> <td>2004</td> <td>Littleton, Colorado</td> </tr> <tr> <td>Kevin M. Reddy</td> <td>1995</td> <td>1998</td> <td>Cary, North Carolina</td> </tr> <tr> <td>Kevin M. Reddy</td> <td>1992</td> <td>1995</td> <td>Aurora, Illinois</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)	M. Steven Ells	1993	2004	Denver, Colorado	M. Steven Ells	1992	1993	Boulder, Colorado	Kevin M. Reddy	1998	2004	Littleton, Colorado	Kevin M. Reddy	1995	1998	Cary, North Carolina	Kevin M. Reddy	1992	1995	Aurora, Illinois				
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Kevin M. Reddy	1992	1995	Aurora, Illinois																										

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders (holding more than 25% of the stock), officers, directors and spouses must sign. Full names only, initials not acceptable.

Sign
here _____

Sign
Here _____

Sign
Here _____

Sign
Here _____

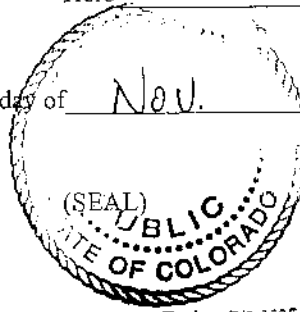
Sign
Here Kevin M. Reddy

Sign
Here _____

Sign
Here _____

Sign
Here _____

Subscribed in my presence and sworn to before me this 2nd day of Nov., 04



My Commission Expires 7/1/2005

In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternative format.

Sign
here [Signature]
Notary Public Signature

Verify & Print form

RECEIVED

FORM 35-4010

REV 1/01

NOV - 9 2004

NEBRASKA LIQUOR
CONTROL COMMISSION

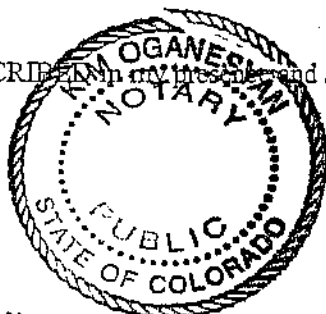
**NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION**

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

Kevin M. Reddy

Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 8th day of Sept, A.D., 2003



My Commission Expires 7/9/2006

Kim Oganesyan

Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

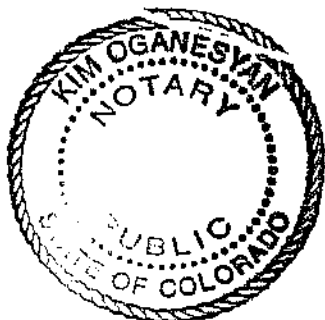
Kevin M. Reddy

Signature of Licensee/Applicant

KEVIN M. REDDY

Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 8th day of Sept., A.D., 2003



My Commission Expires 7/9/2006

Kim Oganesyan

Signature of Notary Public

RECEIVED

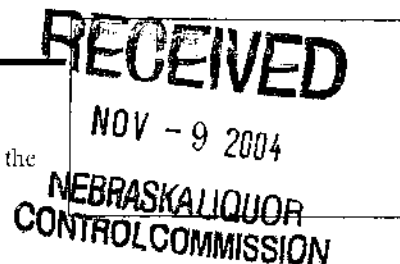
NOV - 9 2004

**NEBRASKA LIQUOR
CONTROL COMMISSION**

FORM 35-4178
REV 2/01

Corporation/LLC Application for License - Form 3

Nebraska Liquor Control Commission

**INSTRUCTIONS:**

- 1) Application and application for manager must be typewritten and submitted in triplicate
- 2) Fingerprint cards (2 cards per person) must be submitted for: a) each stockholder owning over 25% of the stock, b) chief executive officer, c) proposed manager and d) all spouses
- 3) Information regarding spouses must be completed

Required areas marked by a red asterisk (*)

Name of Corporation That Will Hold License. Attach copy of Articles of Incorporation

Total Number of Shares (if corporation)

Chipotle Mexican Grill of Colorado, LLC *

*

Corporate Street Address

Mailing address for receipt of Liquor Control Commission Mailings

1543 Wazee Street, Suite 200 *

1543 Wazee Street, Suite 200 *

Corporate Telephone Number

City

County

State

Zip Code

303-595-4000 *

Denver *

Denver *

CO *

80202 * -

Name of Registered Agent

Name of Proposed Manager

CT Corporation *

Aaron Michael Dansky *

IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER

Name

Title

Date of Birth

M. Steven Ells *

Manager *

*

Social Security Number

Home Address (1)

City

*

100 S. Marion Parkway *

Denver *

State

Zip Code

Home Telephone Number

CO *

80209 * -

303-744-3002 *

PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES

Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases

Social Security Number

Date of Birth

Title

Name

Ells, Matthew Steven

Manager

Spouse Name

None

Partner Number of Shares / % 0

Spouse Number of Shares / % 0

Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases

Social Security Number

Date of Birth

Title

Name

Reddy, Kevin Michael _____ Spouse Name Reddy, Leigh Overstreet _____ Partner Number of Shares / % <input type="text" value="0"/>	_____ _____ _____ Spouse Number of Shares / % <input type="text" value="0"/>
Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	
Name _____ Spouse Name _____ Partner Number of Shares / % <input type="text"/>	Social Security Number _____ _____ _____ Date of Birth _____ _____ _____ Title _____ _____ _____ Spouse Number of Shares / % <input type="text"/>
Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	
Name _____ Spouse Name _____ Partner Number of Shares / % <input type="text"/>	Social Security Number _____ _____ _____ Date of Birth _____ _____ _____ Title _____ _____ _____ Spouse Number of Shares / % <input type="text"/>
Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	
Name _____ Spouse Name _____ Partner Number of Shares / % <input type="text"/>	Social Security Number _____ _____ _____ Date of Birth _____ _____ _____ Title _____ _____ _____ Spouse Number of Shares / % <input type="text"/>

(If Necessary, Continue on Separate Sheet)

Is this Corporation/LLC controlled by another Corporation?

Yes ☐ No ☒

Name of control Corporation

Chipotle Mexican Grill, Inc.

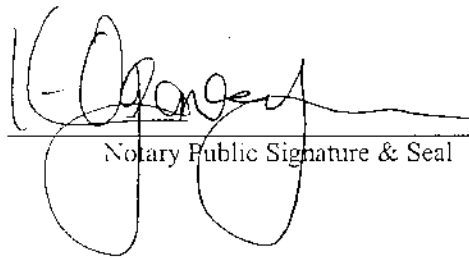
IF YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LCC. Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock owned.

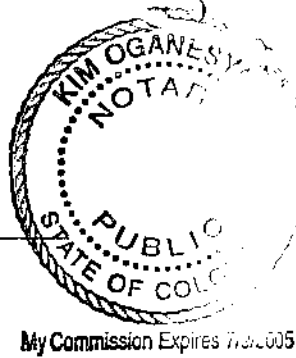
Please indicate below your corporate tax year with the IRS


Starting date: January 1 Ending date: December 31


State of Colorado

Denver County


Notary Public Signature & Seal



By 
President/Member


Secretary/Member

In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

Verify Form and Print

FORM 35-4183
REV. 02/01

RECEIVED
NOV - 9 2004
NEBRASKA LIQUOR
CONTROL COMMISSION

Application for Corporate Manager

Must Be A Nebraska Resident

Please submit in Triplicate

Return to: Nebraska Liquor Control Commission, PO Box 95046
301 Centennial Mall So., Lincoln NE 68509

Phone: (402) 471-2571

Fax: (402) 471-2814

Web address: <http://www.nol.org/home/NLCC/>

Required areas marked by a red asterisk (*)

LIQUOR LICENSE INFORMATION

Name of Licensed Corporation

Chipotle Mexican Grill of Colorado, LLC *

Class & License number

I- *

Trade Name of Licensed Premise

Chipotle Mexican Grill *

Street Address of Licensed Premise

2801 Pine Lake Road *

City

Lincoln *

County

Lancaster *

On behalf of the corporation, I designate this individual as corporate manager.

Signature of Corporate President/CEO: 

APPLICANT INFORMATION (MUST BE 21 OR OVER)

Full Name (Last, First, Middle, Maiden)

Dansky, Aaron Michael *

Sex *

F

M

C

G

Social Security Number

_____ *

Date of Birth

_____ *

Place of Birth

Hayward, CA *

Home Street Address

300 Hadkins Road *

City

Malcolm *

County

Lancaster *

State

NE *

Zip Code

68402 *

Home Telephone Number

402-796-2609 *

Business Telephone Number

402-474-1133 *

402-2801

Drivers License Number

_____ *

RECEIVED

NOV - 9 2004

State

NE *

**NEBRASKA LIQUOR
CONTROL COMMISSION**

cel 450-3802

Are You Married? * Yes ☒ No ☐ If Yes, You must complete the following:

SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)

Full Name (Last, First, Middle, Maiden)

Dansky, Julie Lyn (Brown)

Social Security Number

Drivers License Number

State

NE

Date of Birth

Place of Birth

Lincoln, Nebraska

* 1. **READ CAREFULLY.** Answer completely and accurately.

Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

Yes No
☒ ☐ See attached

* 2. Have you or your spouse ever made application for any liquor license or manager for any liquor license? IF YES, for what premise give license number and date.

Yes No
☐ ☒

* 3. Have you or your spouse ever made a compromise settlement for violation of such laws?

Yes No
☐ ☒

* 4. Do you, as a manager, have all the qualifications required by any person entitled to hold a Nebraska Liquor License?
Nebraska Liquor Control Act (§53-131.01)

Yes No
☒ ☐

* 5. Have you filed fingerprint cards and **PROPER FEES** (if check, make out to the NE State Patrol), with this application?

Yes No
☒ ☐

RESIDENCES FOR PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE

Year
From To

Applicant: City & State

Malcolm, Nebraska 2002 2004

Spouse: City & State

Malcolm, Nebraska 2001 2004

Year
From To

Applicant: City & State

Independence, Kentucky 2001 2002

Spouse: City & State

Raymond, Nebraska 1989 2001

Year
From To

Applicant: City & State

Lincoln, Nebraska 2000 2001

Spouse: City & State

Year
From To

Applicant: City & State

Solana Beach, California 1999 2000

Spouse: City & State

EMPLOYERS - LIST LAST TWO EMPLOYERS

Year

From To

Name of Employer

Chili's 2002 2004

Name of Supervisor

Telephone Number

Will Hoyt 402-420-2800

Year

From To

Name of Employer

Cracker Barrel 2000 2002

Name of Supervisor

Telephone Number

Jeff Hanselmann 402-476-4901

PERSONAL OATH AND CONSENT OF INVESTIGATION - MUST BE SIGNED BY APPLICANT &

SPOUSE

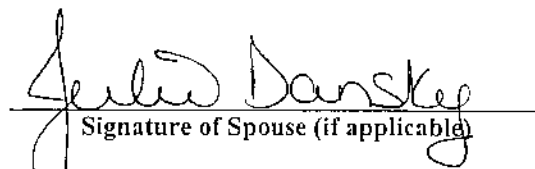
STATE OF NEBRASKA)
) SS
COUNTY OF)

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, an affidavit may be attached, however, fingerprint cards are still required to be filed.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and inaccurate.


Signature of Applicant

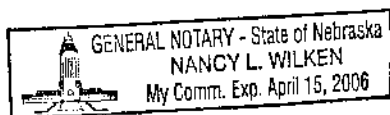

Signature of Spouse (if applicable)

Subscribed in my presence and sworn to before me this 1 day
of November, 2004.

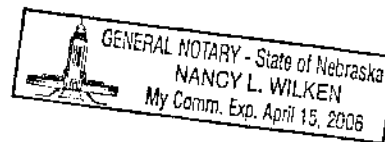
Subscribed in my presence and sworn to before me this 29 day
of October, 2004.


Notary Signature & Seal


Notary Signature & Seal



Verify and Print

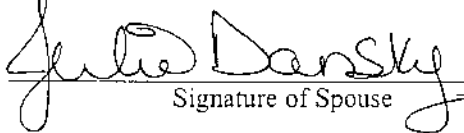


FORM 35-4013
REV. 2/01

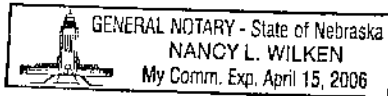
RECEIVED
NOV - 9 2004
NEBRASKA LIQUOR
CONTROL COMMISSION


**NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION**

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

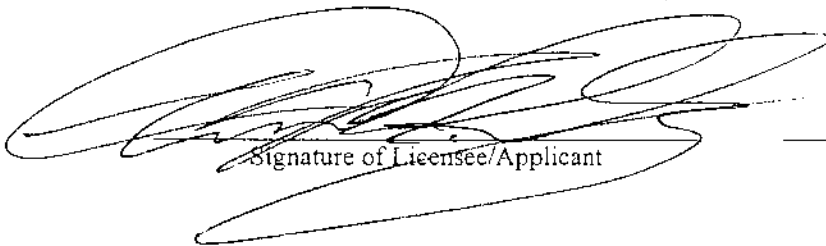

Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 29 day of October, A.D., 2004.



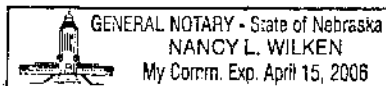

Signature of Notary Public

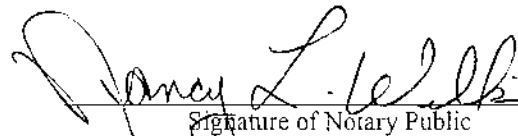
The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.


Signature of Licensee/Applicant

AARON M. DARSKY
Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 1 day of November, A.D., 2004.




Signature of Notary Public

RECEIVED

NOV - 9 -

**NEBRASKA LIQUOR
CONTROL COMMISSION**

RECEIVED

NOV - 9 2004

**NEBRASKA LIQUOR
CONTROL COMMISSION**

FORM 35-4178
REV 2/01



CITY OF LINCOLN
NEBRASKA

Lincoln Police Department
Thomas K. Casady, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492

LINCOLN
The Community of Opportunity

MAYOR COLEEN J. SENG

lincoln.ne.gov

December 15, 2004

Mayor Seng and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Gas N Shop, 600 West 'O' Street requesting a class D liquor license.

Gas N Shop has requested that Connie Hynck be approved as the manager of the liquor license.

Background information on Connie Hynck will be omitted as she had previously been approved by the Council on several Gas N Shop liquor licenses.

Stockholder information is included for your review.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



A nationally accredited law enforcement agency



STATE OF NEBRASKA

10-12f



October 9, 2004

Mike Johanns
Governor

City Clerk
555 South 10th Street
Lincoln NE 68508-3993

Re: Liquor application for Gas N Shop

Dear Local Governing Body:

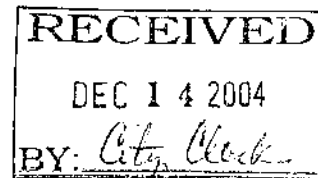
Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

- 1) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.



PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Michelle Porter
Licensing Division

Enclosures

Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

FORM 35-4001
REV. 12/99

Gas N Shop
600 W 9th St.
Class D

A4-137742
147

lease
NewLocal
mp**RECEIVED**

DEC - 8 2004

APPLICATION FOR LICENSENebraska Liquor Control Commission
PO Box 95046,
301 Centennial Mall South
Lincoln, NE 68509-5046<http://www.nol.org/home/NLCC/>
Phone: (402) 471-2571
Fax: (402) 471-2814**NEBRASKA LIQUOR
CONTROL COMMISSION**

INSTRUCTIONS: Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders holding over 25% stock 6. All applications must be typewritten or printed clearly 7. Submit in Triplicate 8. Required areas marked by a red asterisk (*)

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH

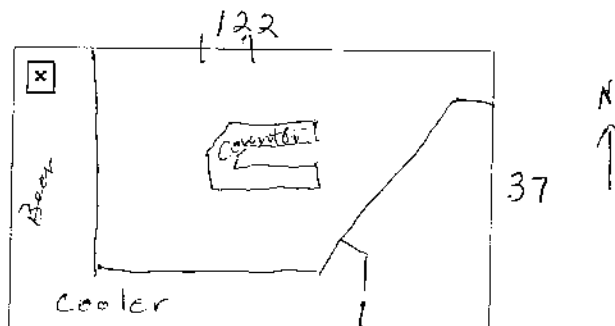
Class of License (Check applicable class) *	Registration Fee	License Fees	Corporate Surety Bond *send copy
<input type="checkbox"/> A Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> F Beer, On Sale Only - Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> B Beer, Off Sale Only - Inside/Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> J Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> I Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input checked="" type="checkbox"/> D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits	\$45.00	\$150.00	exempt
<input type="checkbox"/> D1 Spirits, Wine, Beer, Off Sale Only - within extraterritorial zoning jurisdiction	\$45.00	\$150.00	exempt
<input type="checkbox"/> C Spirits, Wine, Beer On & Off Sale - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> M Bottle Club (Spirits, Wine, Beer, On Sale)	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> H Nonprofit Corporation	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> K Wine Only, Off Sale	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> O Boat	\$45.00	\$50.00	exempt
<input type="checkbox"/> V Manufacturer of Beer, Wine & Distilled Spirits	\$45.00	Varies \$100 to \$1,000	*\$10,000 min.
<input type="checkbox"/> X Wholesale Liquor	\$45.00	\$500.00	*\$ 5,000 min.
<input type="checkbox"/> W Wholesale Beer	\$45.00	\$250.00	*\$ 5,000 min.
<input type="checkbox"/> Y Farm Winery	\$45.00	\$250.00	*\$ 1,000 min.
<input type="checkbox"/> L Craft Brewery (Brew Pub)	\$45.00	\$250.00	*\$ 1,000 min.

TYPE OF APPLICATION *	NAME OF PERSON ASSISTING WITH APPLICATION
Type of application being applied for (check appropriate box)	
1. Individual License requires Form 1 to be attached.	Name Dorothy Bockoven, Attorney at Law
2. Partnership License requires Form 2 to be attached.	Firm Name _____ Address _____
3. <input checked="" type="checkbox"/> Corporate License requires Forms 3 and Manager Application to be attached	Gas 'N Shop, Inc. PO Box 81463, Lincoln, NE 68501

SECTION A - LOCATION INFORMATION - Must be completed by all applicants			
Trade Name (name of business)		Telephone Number at premise to be licensed	
Gas 'N Shop		unknown	
1) Street Address of Proposed licensed premise		2) Mailing Address for receipt of Liquor Control Commission mailings	
600 West O Street		PO Box 81463	
City	County	City	County
Lincoln	Lancaster	Lincoln	Lancaster
Zip Code	Is this located inside the city limits?	Zip Code	
68528	<input checked="" type="radio"/> Yes <input type="radio"/> No	68501	

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg. is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.



Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement. Approximately 30' x 50' at the East end.

See Att.

one floor -
restrooms will be on the
East in between Gas 'N
Shop & McDonald's.

SECTION B			OTHER INFORMATION REQUIRED *
	Yes	No	Explanation/Comments Note: Only what is visible on screen will be printed
<p>* 1. READ CAREFULLY. Answer completely and accurately.</p> <p>Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. Include any DWIs or DUIs. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.</p>	<input checked="" type="radio"/>	<input type="radio"/>	<p>Tom Vik 9/01 DUI Lancaster County; 1975 DUI (to the best of his recollection)</p> <p>Robert Hynek 1979 DUI Douglas County; DUI 1981 Douglas County</p>
<p>* 2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).</p>	<input type="radio"/>	<input checked="" type="radio"/>	
<p>* 3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.</p>	<input type="radio"/>	<input checked="" type="radio"/>	
<p>* 4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.</p>	<input checked="" type="radio"/>	<input type="radio"/>	Hastings State Bank
<p>* 5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.</p>	<input type="radio"/>	<input checked="" type="radio"/>	

<p>* 6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.</p>	Yes	<input checked="" type="radio"/> No	
<p>* 7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?</p>	Yes	<input checked="" type="radio"/> No	
<p>* 8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.</p>	Yes	<input checked="" type="radio"/> No	
<p>* 9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.</p>	Yes	<input checked="" type="radio"/> No	
<p>10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.</p>	Hastings State Bank Larry W. Coffey Tom Vik		
<p>11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.</p>	Larry W. Coffey and Gas 'N Shop holds several licenses		
<p>12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations</p>	Connie L. Hynek Unknown at this time		

13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.	TAM training Lincoln Beverage Hospitality Course		
14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed)	attached		
15. When do you intend to open for business?	April 2005		
16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.			
NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
See attached sheet			

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders (holding more than 25% of the stock), officers, directors and spouses must sign. Full names only, initials not acceptable.

Sign
Here

[Signature]

Sign
Here

[Signature]

Sign
Here

[Signature]

Sign
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[Signature]

Sign
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[Signature]

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[Signature]

Sign
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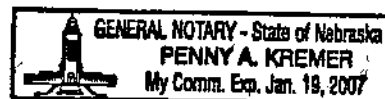
[Signature]

Sign
Here

[Signature]

Subscribed in my presence and sworn to before me this 3rd day of December, 2004

(SEAL)



In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternative format.

Sign
here

[Signature]
Notary Public Signature

Verify & Print for

RECEIVED

FORM 35-4010

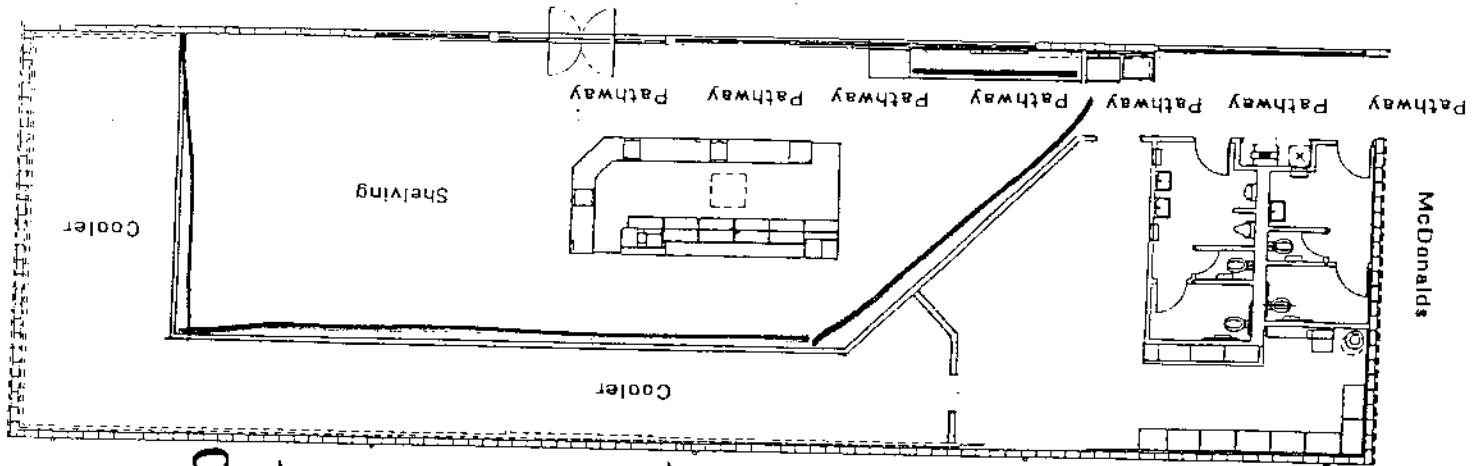
DEC - 8 2004

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REV 1/01

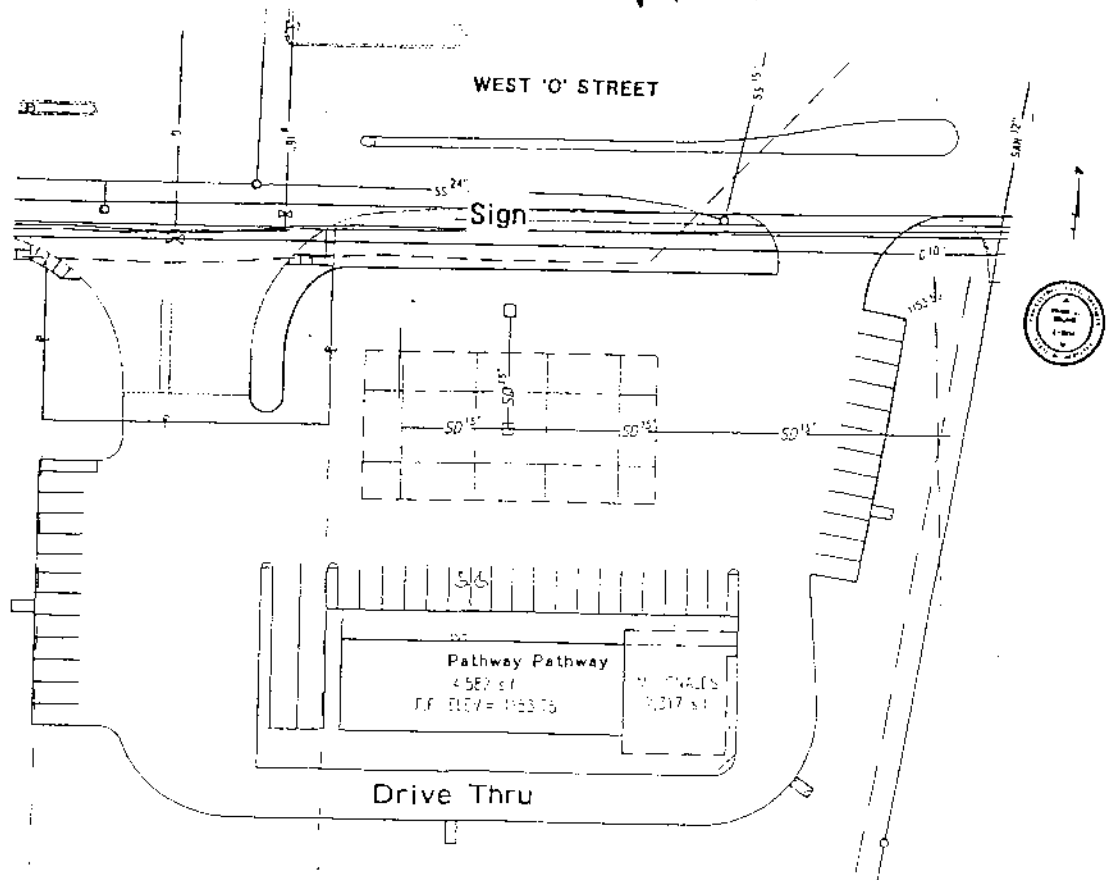
**NEBRASKA LIQUOR
CONTROL COMMISSION**

EXHIBIT B

PLANS OF THE McDONALD'S PREMISES, EASEMENTS AND RESTROOMS



East corner of main floor approx 122' x 37'



Corporation/LLC Application for License - Form 3
Nebraska Liquor Control Commission

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**NEBRASKA LIQUOR
CONTROL COMMISSION****INSTRUCTIONS:**

- 1) Application and application for manager must be typewritten and submitted in triplicate
 2) Fingerprint cards (2 cards per person) must be submitted for: **a)** each stockholder owning over 25% of the stock, **b)** chief executive officer, **c)** proposed manager and **d)** all spouses
 3) Information regarding spouses must be completed

Required areas marked by a red asterisk (*)

Name of Corporation That Will Hold License. **Attach copy of Articles of Incorporation**

Gas 'N Shop, Inc. *

Total Number of Shares (if corporation)

100 *

Corporate Street Address

701 Marina Bay Place *

Mailing address for receipt of Liquor Control Commission Mailings

PO Box 81463 *

Corporate Telephone Number

402-475-1101 *

City

Lincoln *

County

Lancaster *

State

NE *

Zip Code

68528 * -]

Name of Registered Agent

Dorothy Bockoven *

Name of Proposed Manager

Connie L. Hynek *

IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER

Name

Larry W. Coffey *

Title

President *

Date of Birth

*

Social Security Number

Home Address (I)

730 Lakeshore Drive *

City

Lincoln *

State

NE *

Zip Code

68528 * -]

Home Telephone Number

402-474-1669 *

PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES

Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title
Name Coffey, Larry Wayne			President
Spouse Name Coffey, Connie F. (Rose)			
Partner Number of Shares / % 100	Spouse Number of Shares / % 0		
Name of Officers, Directors, Members and Spouses.			

Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title
Name Vik, Thomas C.			Treas./VP of Finance
Spouse Name Vik, Chris E. (Shope)			
Partner Number of Shares / % 0	Spouse Number of Shares / % 0		

Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title
Name Cap, David T.			Chief Operations Ofcr
Spouse Name Cap, Susan A.			
Partner Number of Shares / % 0	Spouse Number of Shares / % 0		

Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title
Name Smetter, Sue A.			Secretary
Spouse Name			
Partner Number of Shares / % 0	Spouse Number of Shares / %		

Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title
Name			
Spouse Name			
Partner Number of Shares / %	Spouse Number of Shares / %		

(If Necessary, Continue on Separate Sheet)

Is this Corporation/LLC controlled by another Corporation?

Yes

No

Name of control Corporation _____

If YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LCC. Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock owned.

Please indicate below your corporate tax year with the IRS

Starting date: January 1

Ending date: December 31

State of NEBRASKA

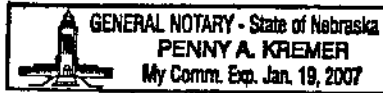
)

) ss.

LANCASTER County

)

Penny A. Kremer
Notary Public Signature & Seal



By [Signature]
President/Member

[Signature]
Secretary/Member

In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

Verify Form and Print

FORM 35-4183
REV. 02/01

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DEC - 8 2004

**NEBRASKA LIQUOR
CONTROL COMMISSION**

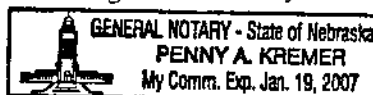
**NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION**

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

Carrie S. Coffey
Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 3rd day of December, A.D., 2004.

Penny A. Kremer
Signature of Notary Public



The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

[Signature]
Signature of Licensee/Applicant

Larry W. Coffey
Print Name of Licensee/Applicant

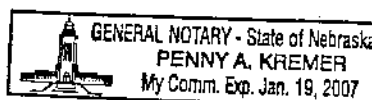
SUBSCRIBED in my presence and sworn to before me this 3rd day of December, A.D., 2004.

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DEC - 8 2004

**NEBRASKA LIQUOR
CONTROL COMMISSION**

Penny A. Kremer
Signature of Notary Public



FORM 35-4178
REV 2/01

Application for Corporate Manager

Must Be A Nebraska Resident

Please submit in Triplicate

Return to: Nebraska Liquor Control Commission, PO Box 95046
301 Centennial Mall So., Lincoln NE 68509

Phone: (402) 471-2571 **Fax:** (402) 471-2814 **Web address:** <http://www.nol.org/home/NLCC/>

Required areas marked by a red asterisk (*)

LIQUOR LICENSE INFORMATION

Name of Licensed Corporation Gas 'N Shop, Inc. * Class & License number D *
Trade Name of Licensed Premise Gas 'N Shop #81 *
Street Address of Licensed Premise 600 West O Street * City Lincoln * County Lancaster *

On behalf of the corporation, I designate this individual as corporate manager.

Signature of Corporate President/CEO: 

APPLICANT INFORMATION (MUST BE 21 OR OVER)

Full Name (Last, First, Middle, Maiden) Hynek, Connie Lou (Heinke) * Sex * ☒ F ☐ M Social Security Number _____ *

Date of Birth _____ * Place of Birth Nebraska City, Nebraska *

Home Street Address 4107 R Road * City Talmage * County Otoe *

State NE * Zip Code 68448 * Home Telephone Number 402-264-4015 *

Business Telephone Number 402-475-1101 *

Drivers License Number _____ * State _____

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DEC - 8 2004

NEBRASKA LIQUOR
CONTROL COMMISSION

Are You Married? * Yes No If Yes, You must complete the following:

SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)

Full Name (Last, First, Middle, Maiden)

Hynek, Robert Dean

Social Security Number

Drivers License Number

State

NE

Date of Birth

Place of Birth

Schuyler, NE

* 1. **READ CAREFULLY.** Answer completely and accurately.

Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

☒ Yes No *See attached*

* 2 Have you or your spouse ever made application for any liquor license or manager for any liquor license? IF YES, for what premise give license number and date.

☒ Yes No *See attached*

* 3. Have you or your spouse ever made a compromise settlement for violation of such laws?

Yes ☒ No

* 4. Do you, as a manager, have all the qualifications required by any person entitled to hold a Nebraska Liquor License?

Nebraska Liquor Control Act (§53-131.01)

☒ Yes No

* 5. Have you filed fingerprint cards and **PROPER FEES** (if check, make out to the NE State Patrol), with this application?

☒ Yes No

RESIDENCES FOR PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE

Year

From To

Applicant: City & State

4107 R Road, Talmage NE

1974 now

Spouse: City & State

4107 R Road, Talmage NE

1992 now

Year

From To

Applicant: City & State

Spouse: City & State

Year

From To

Applicant: City & State

Spouse: City & State

Year

From To

Applicant: City & State

Spouse: City & State

EMPLOYERS - LIST LAST TWO EMPLOYERS

Year

From To

Name of Employer

Nemaha Valley Schools

1976 1988

Name of Supervisor

unknown

Telephone Number

unknown

Year

From To

Name of Employer

Gas 'N Shop, Inc.

1987 now

Name of Supervisor

Telephone Number

Dave Cap

402-475-1101

**PERSONAL OATH AND CONSENT OF INVESTIGATION - MUST BE SIGNED BY
APPLICANT & SPOUSE**

STATE OF NEBRASKA)

) SS

COUNTY OF)

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, an affidavit may be attached, however, fingerprint cards are still required to be filed.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and inaccurate.

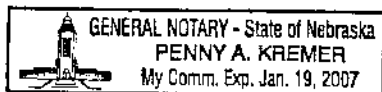
Signature of Applicant

Signature of Spouse (if applicable)

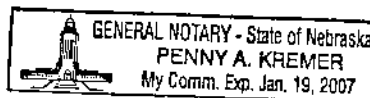
Subscribed in my presence and sworn to before me this
8th day of DEC. 2004.

Subscribed in my presence and sworn to before me this
8th day of DEC. 2004.

Notary Signature & Seal



Notary Signature & Seal



Verify and Print

FORM 35-4013
REV. 2/01**RECEIVED**

DEC - 8 2004

**NEBRASKA LIQUOR
CONTROL COMMISSION**